

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
fee DETERMINATION			
O.I.P.E. CLASSIFIER	DM	32	7/24
FORMALITY REVIEW	ATR	354	8/2/01
RESPONSE FORMALITY REVIEW	TS	117	03/01/02

09905027

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted D Objected

Claim	Date
Original	5/2/00
1	✓
2	
3	
4	
5	
6	
7	✓
8	0
9	✓
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14	
15	
16	
17	
18	✓
19	✓
20	✓
21	
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Original	
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Claim	Date
Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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